STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH BUREAU OF REGULATORY SERVICES

In re: Lehang Suydam

Petition No. 2000-1023-013-002

REINSTATEMENT CONSENT ORDER

WHEREAS, Lehang Suydam of Burlington, Connecticut (hereinafter "respondent") has been issued license number 004904 to practice dental hygiene by the Department of Public Health (hereinafter "the Department") pursuant to Chapter 379a of the General Statutes of Connecticut, as amended; and,

WHEREAS, respondent's license expired on March 31, 1998 and respondent has now applied to have said license reinstated by the Department pursuant to Chapter 368a of the General Statutes of Connecticut, as amended; and,

WHEREAS, respondent hereby admits as follows:

- 1. That from April 1, 1998 until present she practiced dental hygiene during which time her license had lapsed.
- 2. That the conduct described above constitutes grounds for denial of respondent's application for reinstatement pursuant to §19a-14(a)(6) of the General Statutes of Connecticut.

NOW THEREFORE, pursuant to §§19a-17 and 20-1260 of the General Statutes of Connecticut, as amended, respondent hereby stipulates and agrees as follows:

1. She waives her right to a hearing on the merits of this matter.

- 2. Respondent's license to practice dental hygiene shall be reinstated when she satisfies the requirements for reinstatement of her license, as set forth in Sections 19a-14-1 through 19a-14-5 inclusive, of the Regulations of Connecticut State Agencies, and this Reinstatement Consent Order is executed by all parties.
- 3. Respondent shall pay a civil penalty of two hundred fifty dollars (\$250.00) by certified or cashier's check payable to "Treasurer, State of Connecticut." The check shall reference the Petition Number on the face of the check. Said civil penalty shall be payable at the time respondent submits this executed Reinstatement Consent Order to the Department.
- 4. Respondent shall comply with all federal and state statutes and regulations applicable to her license.
- 5. Respondent shall notify the Department of any change in her home and/or business address within fifteen (15) days of such change.
- 6. Legal notice shall be sufficient if sent to respondent's last known address of record reported to the Licensure and Registration Section of the Division of Health Systems Regulation of the Department.
- 7. Respondent understands this Reinstatement Consent Order may be considered as evidence of the above-admitted violations in any proceeding before the Connecticut Department of Public Health in which (1) her compliance with this Reinstatement Consent Order is at issue, or (2) her compliance with §20-1260 of the General Statutes of Connecticut, as amended, is at issue.
- 8. This Reinstatement Consent Order and the terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Further, this Reinstatement Consent Order is not subject to appeal or review under the provisions of Chapters 54 or 368a of the Connecticut General Statutes provided that this stipulation shall not

deprive respondent of any other rights that she may have under the laws of the State of Connecticut or of the United States.

- 9. This Reinstatement Consent Order is a revocable offer of settlement which may be modified by mutual agreement or withdrawn by the Department at any time prior to its being executed by the last signatory.
- 10. This Reinstatement Consent Order is effective when accepted and approved by a duly appointed agent of the Department.
- 11. Respondent has the right to consult with an attorney prior to signing this document.
- 12. This Reinstatement Consent Order is a matter of public record.

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I, Lehang Suydam, have read the above Reinstatement Consent Order, and I agree to the terms and allegations set forth therein. I further declare the execution of this Reinstatement Consent Order to be my free act and deed.

	<u>Lo</u> Lehang S	hen Sryde	
Subscribed and sworn to before me this _	26 ⁷⁴ da	y of <u>October</u>	2000.
	Notary P by law to affirmation	ublic or person authorized administer an oath or on party (omnis) 5	red AlejANDO RODRIGUEZ TON EXPIRE SIZO

Kathleen Zarrella, Director
Division of Health Systems Regulation

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